

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS  | ID NO.                        | DATE                            |
|---------------------------|-----------|-------------------------------|---------------------------------|
| FEE DETERMINATION         |           |                               |                                 |
| O.I.P.E. CLASSIFIER       | <i>md</i> | <i>45</i>                     | <i>12/23</i>                    |
| FORMALITY REVIEW          |           |                               |                                 |
| RESPONSE FORMALITY REVIEW | <i>cg</i> | <i>67563</i><br><i>109665</i> | <i>1-16-4</i><br><i>3-26-01</i> |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date         |
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| Final Original |              |
| 1              | <i>12/23</i> |
| 2              | <i>12/23</i> |
| 3              | <i>12/23</i> |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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